



# POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/835,870
Filing Date	08/05/2003
First Named Inventor	Theresa M. Miale
Title	Animal life and transport apparatus
Art Unit	3844
Examiner Name	Shaw, Elizabeth Anne
Attorney Docket Number	3458-CON

I hereby revoke all previous powers of attorney given in the above-identified application.

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Signature	<i>Theresa Miale</i>	Date	9/29/05
Name	Theresa Miale	Telephone	858-793-7314
Title and Company	Ty-Lift Enterprises <sup>(R)</sup>		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

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PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/635,870	
	Filing Date	08/05/2003	
	First Named Inventor	Theresa M. Miale	
	Art Unit	3644	
	Examiner Name	Shaw, Elizabeth Anne	
Total Number of Pages in This Submission	2	Attorney Docket Number	3458-CON

ENCLOSURES (Check all that apply)		
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Firm or Individual name	DONN K. HARMS	
Signature		
Date	October 11, 2005	

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